

EXHIBIT B

PENNSYLVANIA DEPARTMENT OF STATE
CORPORATION BUREAU

Certificate of Organization
Domestic Limited Liability Company
(15 Pa.C.S. § 8913)

| | | |
|---------------------------|-------------|-------------------|
| Name Chris Blythe | | |
| Address 3900 Welsh Rd. | | |
| City Willow Grove, PA | State PA | Zip Code 19090 |

Document will be returned to the
name and address you enter to
the left.



Commonwealth of Pennsylvania
CERTIFICATE OF ORGANIZATION 3 Page(s)



T1203860158

Fee: \$125

In compliance with the requirements of 15 Pa.C.S. § 8913 (relating to certificate of organization), the undersigned desiring to organize a limited liability company, hereby certifies that:

1. The name of the limited liability company (*designator is required, i.e., "company", "limited" or "limited liability company" or abbreviation*):

Taq. Willow grove LLC

2. The (a) address of the limited liability company's initial registered office in this Commonwealth or (b) name of its commercial registered office provider and the county of venue is:

| | | | | |
|---|---------------|-------|-----|----------------------|
| (a) Number and Street 3900 Welsh Rd., Willow Grove, PA | City 19090 | State | Zip | County Montgomery |
|---|---------------|-------|-----|----------------------|

| | |
|---|--------|
| (b) Name of Commercial Registered Office Provider c/o: | County |
|---|--------|

3. The name and address, including street and number, if any, of each organizer is (*all organizers must sign on page 2*):

| | |
|----------------------|---|
| Name Chris Blythe | Address - 3900 Welsh Rd., Willow Grove, PA 19090 |
|----------------------|---|

4. *Strike out if inapplicable term*

~~A member's interest in the company is to be evidenced by a certificate of membership interest.~~

5. *Strike out if inapplicable:*

~~Management of the company is vested in a manager or managers.~~

6. The specified effective date, if any is: _____

month date year hour, if any

7. *Strike out if inapplicable:* ~~The company is a restricted professional company organized to render the following restricted professional service(s):~~

8. For additional provisions of the certificate, if any, attach an 8½ x 11 sheet.

IN TESTIMONY WHEREOF, the organizer(s) has (have)
signed this Certificate of Organization this

29 day of 2012



Signature

Signature

Signature